# MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

# **COMO TEXTILE**

# 27220022-OUTLETS 1 & 2

| 1.  | MONTH OF OCTOBER 1, 2008 THRU OCTOBER 31, 2008                             |     |    |      |
|-----|--|-----|----|------|
| 2.  | Is Outlet # (8 digit) Correct?   | Y   | N  | N/A  |
| 3.  | Is average Total flow-gal.day stated in space provided 76 17 18 10 20 3    | Y   | N  | N/A  |
| 4.  | Is max. Total flow-gal day stated in space provided?                       | Y   | N  | N/A  |
| 5.  | Is method used to calculate water stated?                                  | ZY) | N  | N/A  |
| 6.  | Are number of working days stated?   | NYY | N  | N/A  |
| 7.  | Are there any parameters which have exceeded PUSC-120260 Local Limits?     | Y   |    | N/A  |
| 8.  | Is proper compliance/non-compliance statement provided?                    | (Y) | N  | N/A  |
| 9.  | Have correct number of samples been submitted?                             | Y   | N  | N/A  |
| 10. | Has PHC result been listed on MR-1 report?                                 | Y   | N  | N/A) |
| 11. | Has sample number been reported in space provided?                         | Y   | N  | N/A  |
| 12. | Have all regulated parameters been listed on MR-1?                         | Y   | N  | N/A  |
| 13. | Has sample type been stated on MR-1?                                       | Y   | N  | N/A  |
| 14. | Have all samples been taken during this reporting period?                  | Y   | N  | N/A  |
| 15. | Has NJDEPE certified lab been used?  | Y   | N  | N/A  |
| 16. | Have analytical results been submitted on copies of Laboratory stationery? | Y   | N  | N/A  |
| 17. | Have results been written in space designated on MR-1?                     | (Y) | N. | N/A  |
| 18. | Is correct method used to preserve samples stated on MR-1?                 | (Y) | N  | N/A  |
| 19. | Has MR-1 been signed by authorized representative?                         | Y.  | N  | N/A  |
| 20. | Has information been submitted on proper MR-1 form?                        | Y   | N  | N/A  |
| 21. | Remove Arsenic from report if sampling not required                        | Y   | N  | N/A) |

# MR-1 CHECK OFF LIST FOR NON-CATEGORICAL COMPANIES

| COMO TEXTILE               | 272200              | )22  | •                                     |     |   |     |    |
|----------------------------|---------------------|------|---------------------------------------|-----|---|-----|----|
| First Reviewer: comments o | n deficiencies comp | ETE  |                                       |     |   |     |    |
|                            |                     |      |                                       |     |   |     |    |
|                            |                     |      |                                       |     |   |     | _  |
| Date Reviewed 19/17/08     | Date sent to user   |      |                                       |     |   |     |    |
| Date due back              | Reviewer c          | J.m. |                                       |     | - |     |    |
| Second review comments on  | deficiencies        |      |                                       |     |   |     |    |
|                            |                     |      | 1                                     |     |   |     |    |
|                            |                     |      |                                       |     |   |     | 4. |
|                            |                     |      |                                       |     |   |     |    |
| Date Reviewed              | Date sent to        | user | · · · · · · · · · · · · · · · · · · · |     |   | *** |    |
| Date due back              | Reviewer            |      |                                       |     |   |     |    |
| Date                       | Reviewer            |      |                                       | *** |   |     |    |

CHIVIN

# PRETREATMENT MONITORING REPORT

| NAME:COMO           | O TEXTILE PRINTS INC.                                     |                    | · ·                                     |            | NOV 2        | 2008        |  |  |
|---------------------|---|--------------------|---|------------|--------------|-------------|--|--|
| MAILING ADDR        | MAILING ADDRESS: 191 EAST RAILWAY AVE. PATERSON, NJ 07503 |                    |   |            |              |             |  |  |
| FACILITY LOCA       | TION: 191 EAST RAILWAY                                    | AVENUE PA          | TERSON, NJ 07                           | 7503       |              |             |  |  |
| CATEGORY & S        |   |                    |   | JTLET #:   | 1            |             |  |  |
|                     |   |                    |   |            |              |             |  |  |
| CONTACT OFFIC       | CIAL: MICHAEL BLANCHF                                     | IELD               | TF                                      | ELEPHONE:_ | 973 279-2950 |             |  |  |
| NEW CUSTOME         | R ID / OUTLET ID: <u>27220022</u> ·                       | OLD OU             | TLET DESIGN                             | ATION: 27  | 400341       |             |  |  |
| MONITO              | ORING PERIOD  |                    | Avera                                   | e e        | Maximum      |             |  |  |
| Start               | End   |                    |   | - / A      |              |             |  |  |
| 10 108              | (0 B) (6   F  | Regulated Flow-g   | gal/day                                 | J/A        |              |             |  |  |
| 10 1 00             |   | Cotal Flow, gal/de | 12                                      | 3,434      | 14           | 6,778       |  |  |
| MO DAY YR           | MO DAI IR   | Total Flow-gal/da  |   |            |              | 0) / 10     |  |  |
| Method Used:        | Monthly met   | er real            | to sourie                               | ) Turke    | ed bro       | Dass        |  |  |
| (0)00/4             | en .  | - /                | C CPRUS                                 | 210100     | 0 09         | 0045        |  |  |
| (2000               | -00   |                    |   |            |              |             |  |  |
| Production Rate (in | f applicable)   |                    |   |            | 7            |             |  |  |
| PARAMETER           |   | MASS O             | R CONCENTR                              | ATION      | # OF         | SAMPLE TYPE |  |  |
|                     |   | MON AVG            | MAXIMUM                                 | UNITS      | SAMPLES      | COMP/GRAB   |  |  |
| 1                   | Sample Measurement  | 0.13               |   | myle       |              | 1 -         |  |  |
| 29                  | Permit Requirement  | 3.02               | ,                                       | wyll       |              | Comp        |  |  |
| 06                  | Sample Measurement  | 60.004             |   | mg/l       |              | (           |  |  |
| P.D                 | Permit Requirement  | 0.54               |   | Mayo       |              | Comp        |  |  |
| Ni                  | Sample Measurement  | 5.9                |   | mail       |              | 60          |  |  |
|                     | Permit Requirement Sample Measurement                     |                    |   | alg / C    |              | Coap        |  |  |
| Zn                  | Permit Requirement  | 0.05               |   | algie      |              | Cours       |  |  |
| 010                 | Sample Measurement  | 1.67               |   | myle       |              | - P         |  |  |
|                     | Permit Requirement  | 1617182            |   | 17/        |              |             |  |  |
|                     | Sample Measurement  | 301/18 7920        |   | //         |              | 4 .         |  |  |
|                     | Permit Requirement  | 宏                  |   |            | /            |             |  |  |
|                     | Sample Measurement  |                    | 2345                                    | 0/8/0      | /            |             |  |  |
|                     | Permit Requirement  |                    | 11/103                                  | 1103       |              |             |  |  |
|                     |   | EC 2008            | A P                                     | ///        |              | y 2         |  |  |
| 2                   | Permit Requirement  | 2nd Input          | 36 L                                    |            | انتا         | · ·         |  |  |
|                     | Sample Measurement  | ndusirial Dept.    | 5                                       | 3,980      | 4            |             |  |  |
|                     | Permit Requirement  | 1                  | / DE                                    | 11100      | 57           |             |  |  |
|                     | Sample Measurement  | -1608670           |   | LAGI DUF   | 55/          |             |  |  |
|                     | Permit Requirement  |                    | int                                     | Clam.      | / /          |             |  |  |
|                     | Sample Measurement  |                    |   | 16V        |              |             |  |  |
|                     | Permit Requirement  |                    | 525                                     | 6616       |              |             |  |  |
|                     | Sample Measurement  |                    |   | *-         | . //         | *           |  |  |
|                     | Permit Requirement  |                    | *************************************** |            |              |             |  |  |
|                     | Sample Measurement  |                    |   |            |              |             |  |  |
|                     | Permit Requirement  |                    |   | -          |              |             |  |  |
|                     | Sample Measurement  |                    |   |            |              |             |  |  |
|                     | Permit Requirement Sample Measurement                     |                    |   |            |              |             |  |  |
| ļ -                 | Permit Requirement  |                    |   | *:         |              |             |  |  |
|                     | 1 orinit Kedanement                                       |                    |   |            |              |             |  |  |

| PRETREA | TMENT | MONITO | DRING | REPORT |
|---------|-------|--------|-------|--------|
|         |       |        |       |        |

| PRETREATMENT MONITORING REPORT   |
|--|
| Certification of Non-Use if applicable (use additional sheets): We have been certified                                     |
| for Non-use for Cd. Cr. Ha   |
| - 101 Ca, Cr, 179  |
|  |
|  |
| Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every             |
| parameter used: We are in Compliance of the local  |
| limits) on Ca, Pb, Ch, Ni  |
|  |
| Explain Method for preserving samples: <u>Samples</u> were taken and   |
| Stored at 4 degrees centiquade. Nitric   |
| Acid was used to preserve The samples  |
| at less than DH 2.0  |
|  |
| I certify under penalty of law that this document and attachments were prepared under my direction or supervision in       |
| accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitte |
| Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering    |
| the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.        |
| I am aware that there are significant penalties for submitting false information, including the possibility of             |
| fine and imprisonment for knowing violations.  |
|  |
| 403.6(a)(2)(ii) revised by 53 FR 49610, October 17, 1988   |
| TO DO R  |
| Clfurf/FD/   |
| Signature of Principal   |
| Executive or Authorized Abent  |
| H1   |
| Michael F. Blanchfield   |
| The President  |
| Type Name and Title  |
| 11/19/2008   |
| Date   |
|  |

PVSC FORM MR-1 REV: 5 3/91 P 2

# PRETREATMENT MONITORING REPORT

NOV 2 0 2008

| NAME: COMO          | O TEXTILE PRINTS INC.                 |                  |                |           |              |  |
|---------------------|---------------------------------------|------------------|----------------|-----------|--------------|--|
| MAILING ADDR        | ESS: 191 EAST RAILWAY                 | AVE. PATERS      | ON, NJ 07503   | 1,1111    |              | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |
| FACILITY LOCA       | TION: 191 EAST RAILWAY                | AVENUE PA        | TERSON, NJ 0   | 7503      |              |  |
| CATEGORY & SI       | UBPART: 410                           |                  | C              | OUTLET #: | 2            | ·  |
| CONTACT OFFIC       | CIAL: MICHAEL BLANCHE                 | TELD             | Т              | ELEPHONE: | 973 279-2950 |  |
| NEW CUSTOME         | R ID / OUTLET ID: 27220022            | - 2 OLD OL       | JTLET DESIGN   | NATION: 2 | 7400342      |  |
|                     | ORING PERIOD———                       |                  | Avera          |           | Maximum      |  |
| Start               | End                                   |                  |                | / ,       | manum        |  |
|                     |                                       | Regulated Flow-  | gal/day        | DA        |              |  |
| 0 / 08<br>MO DAY YR | 1/0/31/08/1                           | Total Flow-gal/d |                |           | /3,          | 896                                      |
| Method Used:        |                                       | -                |                |           |              |  |
|                     |                                       |                  |                |           |              |  |
|                     |                                       |                  |                |           |              |  |
| Production Rate (if | f applicable)                         | •                |                |           |              |  |
| PARAMETER           |                                       | MASSC            | OR CONCENTE    | ATION     | # OF         | SAMPLE TYPE                              |
| TANGUALTER          |                                       | MON AVG          |                |           | SAMPLES      | COMP/GRAB                                |
|                     | Sample Measurement                    | 2.20 v           |                | 1440      | 1            | COMPONED.                                |
| Ca                  | Permit Requirement                    | 3.02             |                | 16/10     | -            | (Owo)                                    |
| . 00                | Sample Measurement                    | 60.004           | -              | male!     | 1            |  |
| Pb                  | Permit Requirement                    | 0.54             |                | dell      |              | Comp                                     |
| Ni                  | Sample Measurement                    | 20.004           |                | 06/0      |              | (- :                                     |
| 10.                 | Permit Requirement                    | 5.9              | /              | pide      |              | Comp                                     |
| Zn                  | Sample Measurement                    | 0.19             |                | my/e      |              | Comp                                     |
| 210                 | Permit Requirement Sample Measurement | 1.6/             | <del> </del>   | nye       |              | Cows                                     |
|                     | Permit Requirement                    |                  |                | 10        |              |  |
|                     | Sample Measurement                    |                  |                |           |              |  |
|                     | Permit Requirement                    |                  | <del> </del>   |           |              |  |
|                     | Sample Measurement                    |                  |                |           |              |  |
|                     | Permit Requirement                    |                  | 471070         |           |              |  |
|                     | Sample Measurement                    |                  | 10111019<0     | •         |              |  |
|                     | Permit Requirement                    | (10)             |                | 15        |              |  |
| <u> </u>            | Sample Measurement                    | 120              |                | 13/       |              |  |
|                     | Permit Requirement                    | 12/2             | P              | 10        |              |  |
|                     | Sample Measurement Permit Requirement | 6 /1             | DEC JULIO      | N)        |              |  |
|                     | Sample Measurement                    | (0)              | Dro lubrig     | 3         |              |  |
|                     | Permit Requirement                    | 100              | industrial Den | 10/       |              |  |
|                     | Sample Measurement                    | /,0              | illing.        | 167       |              |  |
| .                   | Permit Requirement                    | 1                | 3021 153       | 0         |              |  |
|                     | Sample Measurement                    |                  | 100            |           |              |  |
| . [                 | Permit Requirement                    |                  |                |           |              |  |
|                     | Sample Measurement                    |                  |                |           |              |  |
|                     | Permit Requirement                    |                  |                | -         |              |  |
| _                   | Sample Measurement                    |                  |                | 1         |              |  |
| LL                  | Permit Requirement                    |                  |                |           |              |  |

PVSC FORM MR-1 REV: 4 6/87 P 3

| PRETREATMENT MONITORING REPORT   |
|--|
| Certification of Non-Use if applicable (use additional sheets): We have been certified - for Non-use for Co, C, Hq   |
|  |
| Compliance or non compliance statement with compliance schedule (use additional sheets if necessary) for every parameter used: We are in Compliance of the local limits) on Cu, Pb, Wi, Zn |
| Explain Method for preserving samples: Samples were taken and  |
| Storedat 4 degrees centiquode. Nitric  |
| Acid was used to preserve The samples  |
| at less than pH 2.0  |
| I certify under penalty of law that this document and attachments were prepared under my direction or supervision in   |
| accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted  |
| Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering  |
| the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.  |
| I am aware that there are significant penalties for submitting false information, including the possibility of   |
| fine and imprisonment for knowing violations.  |
|  |
| 403.6(a)(2)(ii) revised by 53 FR 40610, Sectober 17, 1988  Signature of Principal  |
| Executive or Authorized Agent  |
| Michael F. Blanchfield   |
| President  |
| Type Name and Title  |

PVSC FORM MR-1 REV: 5 3/91 P 2

# Technion, Inc. Testing and Research Laboratories

**Client: Como Textiles** 

Date Received: 10/07/08

Date Digested: 10/10/08

# **Test Results**

Sample ID: Pretreatment 1

Matrix: Wastewater

Lab ID: 8264-2

Dil. Factor: 1

| Date<br>Analyzed | Parameter | Results | MDL   | Local Avge<br>Limits | EPA<br>Method |
|------------------|-----------|---------|-------|----------------------|---------------|
| 10/14/08         | Copper    | 0.13    | 0.004 | 3.02                 | 200.8         |
| 10/14/08         | Lead      | N.D.    | 0.004 | 0.54                 | 200.8         |
| 10/14/08         | Nickel    | N.D.    | 0.004 | 5.9                  | 200.8         |
| 10/14/08         | Zinc      | 0.05    | 0.02  | 1.67                 | 200.8         |

Test results are in mg/l (ppm), unless specified.

**MDL**: Minimum Detection Limit

N.D.: Not Detected

**NJDEP No. 07004** 

Page

# Technion Inc., Testing and Research Laboratories

**Client: Como Textiles** 

Date Received: 10/07/08

Date Digested: 10/10/08

## **Test Results**

Sample ID: Pretreatment 2

Matrix: Wastewater

Lab ID: 8264-4

Dil. Factor: 1

| Date<br>Analyzed | Parameter | Results | MDL   | Local Avge<br>Limits | EPA<br>Method |
|------------------|-----------|---------|-------|----------------------|---------------|
| 10/14/08         | Copper    | 2.20    | 0.004 | 3.02                 | 200.8         |
| 10/14/08         | Lead      | N.D.    | 0.004 | 0.54                 | 200.8         |
| 10/14/08         | Nickel    | N.D.    | 0.004 | 5.9                  | 200.8         |
| 10/14/08         | Zinc      | 0.14    | 0.02  | 1.67                 | 200.8         |

Test results are in mg/l (ppm), unless specified.

**MDL**: Minimum Detection Limit

N.D.: Not Detected

**NJDEP No. 07004** 

Page

COMO TEXTILE PRINTS, INC. 191 East Railway Avenue Paterson, New Jersey 07503 tel: (973) 279-2950 fax: (973) 881-8450

Date: ///19/2008

Passaic Valley Sewerage Commissioners Industrial Waste Control Department

RE: Computations for monitoring report

Enclosed are the computations for the enclosed monitoring report:

Service #341

Meter #70025607 4950 (CCF) \* 748 = 3,703,600 gal.

Meter #60094686

120 (CCF) \* 748 = \$9,760 gal.

3,792,360 gal.

5% allowance for evaporation

3,602,742 gal.

Consumption #341

Service #342

480 (CCF) \* 748 = Meter #60094678

359,040

gal.

5% allowance for evaporation

Consumption #342

341,088

gal.

Service #343

Meter #45141583 // (CCF) \* 748 =  $\sqrt{228}$ 

gal.

Sanitary only #343

8,228

gal.

Michael B: President

pvsc36A

Technion Inc.,
Testing and Research Laboratories
263 Hillside Avenue
Nutley, NJ 07110

RECEIVED OCT 2 2 2008

Fax: 973-661-1817

## **Analytical Report**

Client: Como Textiles

Client Ref:

Tel: 973-661-0800

Material: Four Wastewater Samples

**Date:** 10/15/08

Technion Ref: 8264

Date Received: 10/07/08

Lab ID: 08: 8264

Project:

Analysis Req: BOD, TSS, pH / Metals (Cu, Pb, Ni, Zn)

Analyst: Y. Yildiz, S. Zalewski

The above sample(s) were received on 10/07/08 and analyzed as requested.

**Certificate of Analysis** 

**Test Results**: Test results are as attached.

**Metals Subcontracted to QC Laboratories** 

Release of the date contained in this hard copy data package has been authorized by the laboratory manager as verified by the following signature.

Omar Baturay

Laboratory Manager

OB/td

**NJDEP No. 07004** 

**Page** 

Technion Inc.,
Testing and Research Laboratories
263 Hillside Avenue
Nutley, NJ 07110

RECEIVED OCT 3 0 2008

Fax: 973-661-1817

**Analytical Report** 

**Client:** Como Textiles

**Client Ref:** 

Tel: 973-661-0800

Material: One Wastewater

**Date:** 10/21/08

**Technion Ref:** 8285

Date Received: 10/14/08

Lab ID: 08: 8285

Project:

Analysis Req: BOD, TSS, pH

Analyst: Y. Yildiz, S. Zalewski

The above sample(s) were received on 10/14/08 and analyzed as requested.

**Certificate of Analysis** 

Test Results: Test results are as attached.

Release of the date contained in this hard copy data package has been authorized by the laboratory manager as verified by the following signature.

Omar Baturay

Laboratory Manager

OB/td

**NJDEP No. 07004** 

Page 1 of 1



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077

RECEIVED OCT 27 2008

| Bill Date              | Oct 23: 2008 |
|------------------------|--------------|
| Account Number         | 122621-98572 |
| Date of Last Payment   | Oct 22, 2008 |
| Amount of Last Payment | \$ 8,617.02  |
| Previous Balance       | \$ 0.00      |
| Current Charges        | \$ 6,110.02  |
|                        | No.          |
| Total Amount Due       | \$ 6,110.02  |
| Due Date               | Nov 22, 2008 |

SERVICE ADDRESS

191 E RAILWAY AVE, PATERSON

**BILL TYPE** 

**MONTHLY BILL** 

**Billing Period** 

Sep 12, 2008--Oct 14, 2008

Services

Description SERVICE CHARGE FIRST 333 CCF NEXT 9,999,999 CCF

Charge 337.60 462.87 5309.55

Meters

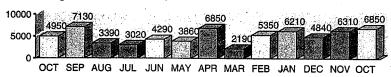
Meter No 70025607

Meter Size 4 INCH

Current Previous 7830 7335

Consumption

Usage History (most recent first)



DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300

RECEIVED OCT 27 2008

Mailing Address:

Amount Enclosed Service Address 191 E RAILWAY AVE, PATERSON

Due Date

Account Number

**Total Amount Due** 

\*A-00-ZFS-AM-00068 րհրակիսինիիկիրոսուրիինիայինակիանին COMO TEXTILE PRINT 191 E RAILWAY AVE PATERSON NJ 07503-2100

PO BOX 11393 NEWARK NJ 07101-4393

PASSAIC VALLEY WATER COMMISSION MadadadHaaalddalalddadhdaalddad

☐ To change mailing address check here and fill out back of

order. Make check or money order payable to PVWC.

form. Please include account number on check or money

122621-98572

Nov 22, 2008

\$ 6,110.02

Page 1 of 1

Page 1 of 1



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077

RECEIVED OCT 27 ZOOB

| Bill Date              | Oct 23, 2008 |
|------------------------|--------------|
| Account Number         | 122623-98574 |
| Date of Last Payment   | Oct 22,2008  |
| Amount of Last Payment | \$ 600.22    |
| Previous Balance       | \$ 0.00      |
| Current Charges        | \$ 738.22    |
|                        |              |
| Total Amount Due       | \$ 738.22    |
| Due Date               | Nov 22, 2008 |

SERVICE ADDRESS 191 E RAILWAY AVE UT001, PATERSON

**BILL TYPE** 

MONTHLY BILL

**Billing Period** 

Sep 12, 2008--Oct 14, 2008

Services

Description SERVICE CHARGE Charge 106.30 FIRST 333 CCF 462.87 NEXT 9,999,999 CCF 169.05

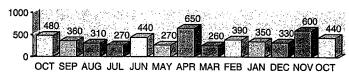
Meters

Meter No 60094678 Meter Size 2 INCH

Current Previous 4929 4881

Consumption 480

Usage History (most recent first)



DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300

RECEIVED OCT 27 2008

Mailing Address:

\*A-00-ZFS-AM-00069 |Կլլանգետ|||լիակոլ|||||Կոլիակոգետ||Կոլիակոնակինիակինի

☐ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PVWC.

| Account Number   | 122623-98574          |
|------------------|-----------------------|
| Due Date         | Nov 22, 2008          |
| Total Amount Due | \$ 738.22             |
| Amount Enclosed  | Terms of the state of |

Service Address:

191 E RAILWAY AVE UT001, PATERSON

PASSAIC VALLEY WATER COMMISSION PO BOX 11393 NEWARK NJ 07101-4393

COMO TEXTILE PRINT

191 E RAILWAY AVE

BILL TYPE MONTHLY BILL



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300 877-772-7077

RECEIVED NOV 1 2 2008

### Page 1 of 1

| Bill Date              | Nov 06, 2008 |  |  |  |  |
|------------------------|--------------|--|--|--|--|
| Account Number         | 122625-98578 |  |  |  |  |
| Date of Last Payment   | Oct 22, 2008 |  |  |  |  |
| Amount of Last Payment | \$ 269.26    |  |  |  |  |
| Previous Balance       | \$ 0.00      |  |  |  |  |
| Current Charges        | \$ 313.74    |  |  |  |  |
|                        | 7.0 A. S.    |  |  |  |  |
| Total Amount Due       | \$ 313,74    |  |  |  |  |
| Due Date               | Dec 06, 2008 |  |  |  |  |

SERVICE ADDRESS 193 E RAILWAY AVE, PATERSON

**Billing Period** 

Sep 12, 2008--Oct 17, 2008

Services

Description Charge SERVICE CHARGE 106.30 SERVICE CHARGE 25.35 FIRST 333 CCF 182.09

Meters

Meter No Meter Size 60094686 2 INCH 45141583 5/8 INCH Current Previous ( 1277 1265 521 510

Consumption 120

Usage History (most recent first)



DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER



Passaic Valley Water Commission P.O. Box 11393 Newark, New Jersey 07101-4393 973-340-4300

RECEIVED NOV 12 2008

Mailing Address:

COMO TEXTILES 193 E RAILWAY AVE PATERSON NJ 07503



☐ To change mailing address check here and fill out back of form. Please include account number on check or money order. Make check or money order payable to PVWC.

| Account Number   | 122625-98578 |
|------------------|--------------|
| Due Date         | Dec 06, 2008 |
| Total Amount Due | \$ 313.74    |
| Amount Enclosed  |              |

Service Address:

193 E RAILWAY AVE, PATERSON

PASSAIC VALLEY WATER COMMISSION PO BOX 11393 NEWARK NJ 07101-4393

TRANSPORTED AT 4°C? 3,9 IZYES SAMPLES IN GOOD CONDITION? IZYES

REMARKS: TRANSPORTED AT 4°C?

Time

Date

Received by (Signature):

Time

Date

inquished by (Signature):

かんかん

LAB 1.D. # X3(0)

# **CHAIN OF CUSTODY**

**TESTING AND RESEARCH LABORATORY** 

**263 HILLSIDE AVENUE** 

TECHNION, INC.

Tel: (973) 661-0800 • Fax: (973) 661 -1817

**NUTLEY, NEW JERSEY 07110** 

REMARKS Time Page \_\_ of . Date C HIVOR NO. OF SAMPLE CONTAINERS Received by (Signature): Time Date Received by (Signature): ۶ 9 SZ. 4 SAMPLE DESCRIPTION (0.25 Time uchal CHECK REPORT TYPE REQUIRED 20-1-a Date EPA TIER I (CLP) D RESULTS ONLY III EPA TIER II (CLP) NJ TIER 1B NJ ECRA II DATE DUE NY DOH OTHER Received by (Signature): TIME 6270 P 80-2-01 DATE 12.7.5 Date Jutactnient #2 Company Name / Address: SAMPLE I.D. retreatment Sampler (Signature): ed by (Signatu Proj. Description Proj. Mgr.

# TROP DOWN BOX

NAME: como TEXTILE PRINTS

MAILING ADDRESS:

# NON USE CERTIFICATION MONITORING REPORT LOCAL LIMITS

| FACILITY LOC    | CATION:                   |                        |  |               |              |             |  |
|-----------------|---------------------------|------------------------|--|---------------|--------------|-------------|--|
| CATEGORY &      | O                         | OUTLET #: 27220022-1+2 |  |               |              |             |  |
| CONTACT OFF     |                           |                        | TELEPHONE #:   |               |              |             |  |
| I have been at  | uthorized to certify non- | use for the follo      | wing heavy met   | als:          | ••           | <del></del> |  |
|                 | Lead                      |                        | The state of the s | SAMPLE DATE   |              |             |  |
| Cadmium Mercury |                           | *****                  |  | MONTH DAY Y   |              |             |  |
|                 | Molybdenum                |                        | 10   | 07            | 08           | _           |  |
| Copper          | Nickel                    |                        |  |               |              |             |  |
|                 |                           |                        |  | 1             |              |             |  |
| PARAMETER       |                           |                        | CONCENTRATION  | CONCENTRATION |              | SAMPLE TYPE |  |
|                 |                           | RESULT                 | THRESHOLD VALUE EXCEEDED YES OR NO   | UNITS         |              | COMP/GRAB   |  |
| NICKEL          | Sample Measurement        | (0.004                 | la:  | m9/1          | m9/1         |             |  |
|                 | Threshold Value           | 0.02                   | n  | C'e           |              | Comp.       |  |
| KOUTLET#1       | Sample Measurement        | 1.                     |  |               |              |             |  |
|                 | Threshold Value           |                        |  |               |              |             |  |
|                 | Sample Measurement        |                        |  |               |              |             |  |
| ,               | Threshold Value           |                        |  |               |              |             |  |
| DICKEL          | Sample Measurement        | (0.004                 | 13   | melL          |              |             |  |
|                 | Threshold Value           | 0.02                   | n  | Comp          |              | omp,        |  |
| COUTLET#2       | Sample Measurement        | 20                     | 561897077  |               |              |             |  |
|                 | Threshold Value           | 1                      | Par Par  | /.            | 1516 17 18 7 | 92022       |  |
|                 | Sample Measurement        | (E)                    | 1 00 To  | 12 3 3        |              | 12          |  |
|                 | Threshold Value           | Č.                     | C Sout out 5   | 7177<br>X     | F :          | 00          |  |
|                 | Sample Measurement        | \0.000                 | Carried Co   | 910           | DEC 20       | ori 257     |  |
|                 | Threshold Value           |                        | -1706  | (0)           | 2m2 (m)      | Dapit.      |  |
|                 | Sample Measurement        |                        | - 635 V  | 103           | 38 1 10      | 05.618      |  |
|                 | Threshold Value           |                        |  |               | 1-19         |             |  |
|                 | Sample Measurement        |                        |  |               |              | Y           |  |
|                 | Threshold Value           |                        |  |               |              |             |  |
| PVSC Form       | MR-3 10/96                |                        | ·  |               |              | 51          |  |